Schedule E)				PAGE 1 OF 8 FOR SE OF FORM 24/48
IAME OF COMMITTEE (In Full)  FEC IDENTIFICATION NUMBER ▼				
EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				
				C C00624817
theck if X 24-hour report 48-hour repo	rt New rep	ort Amends repo		- M / D - D / Y - Y - Y - Y
Full Name of Payee INTERNATIONAL UNION OF	OPERATING E	NGINEERS		of Public Distribution/Dissemination
Mailing Address 1125 17TH ST NW			Amou	10 25 2016 nt
City	State DC	Zip Code 20036	Trans	10032.71 action ID : SE.4576
WASHINGTON	DC	20036		of Disbursement or Obligation
Purpose of Expenditure Canvessing Salaries & Benefits		Category/ Type 001	М	10 25 / Y Y Y Y Y Y
Name of Federal Candidate		<b>X</b> Support	Office Sough	t: House District:
CLINTON, HILLARY, RODHAM, ,		Oppose	<b>x</b> Preside	ent Senate State:
Calendar Year-To-Date Per Election for Office Sought		144921.83	Disbursemen 2016	_ , _
Full Name of Payer				ther (specify)
Full Name of Payee INTERNATIONAL UNION OF OF	PERATING ENG	INEERS		of Public Distribution/Dissemination  10 25 2016
Mailing Address 1125 17TH ST NW			Amou	
City WASHINGTON	State DC	Zip Code 20036	Transa	1259.62 Iction ID : SE.4577
Purpose of Expenditure				of Disbursement or Obligation
Canvessing Salaries & Benefits		Category/ Type 001		10 25 / 2016
Name of Federal Candidate		<b>x</b> Support	Office Sough	t: House District:
HASSAN, MARGARET WOOD, , ,		Oppose	Preside	ent 🗶 Senate State: NH
Calendar Year-To-Date Per Election for Office Sought		1259.62	Disbursemen 2016	ther (specify) ►
				their (openity) -
(a) SUBTOTAL of Itemized Independent Expe	enditures		•	11292.33
(b) SUBTOTAL of Unitemized Independent Ex	xpenditures		•	
(c) TOTAL Independent Expenditures				
				, , , , , , , , , , , , , , , , , , , ,
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
HICKEY, BRIAN, E, Mr.,	[Electron	ically Filed] Date	m m /	26 2016
Signature		_		

Sc	hedule E)				PAGE 2 OF 8 FOR SE OF FORM 24/48
VAI	ME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
	ARN INTERNATIONAL UNION	OF OPERATIN	IG ENGINEERS	S	C C00624817
Che	eck if 🗶 24-hour report 48-hour repor	rt New rep	ort Amends repo		M / D D / Y D Y D Y
	Full Name of Payee INTERNATIONAL UNION OF C	OPERATING EI	NGINEERS	Date of	of Public Distribution/Dissemination
ŀ	Mailing Address 1125 17TH ST NW			Amou	10 25 2016 nt
	City WASHINGTON	State DC	Zip Code 20036		2255.26  action ID : SE.4578 of Disbursement or Obligation
ľ	Purpose of Expenditure Canvessing Salaries & Benefits		Category/ Type 001		10 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
ŀ	Name of Federal Candidate		<b>✗</b> Support	Office Sough	it: X House District:07
	DRISKELL, GRETCHEN, , ,		Oppose	Preside	MI
	Calendar Year-To-Date Per Election for Office Sought		4616.97	Disbursemen 2016 O	ther (specify) ►
ľ	Full Name of Payee INTERNATIONAL UNION OF OF	PERATING ENG	INEERS		of Public Distribution/Dissemination
	Mailing Address 1125 17TH ST NW			Amou	10 25 2016
-	City	State	Zip Code		1008.17
	WASHINGTON	DC	20036		action ID : SE.4579 of Disbursement or Obligation
	Purpose of Expenditure Canvessing Salaries & Benefits		Category/ Type 001		10 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
ľ	Name of Federal Candidate		<b>✗</b> Support	Office Sough	nt: House District:
	MASTO, CATHERINE CORTEZ, , ,		Oppose	Preside	ent Senate State: NV
	Calendar Year-To-Date Per Election for Office Sought		15881.95	Disbursemen 2016	nt For:
	(a) SUBTOTAL of Itemized Independent Expe	enditures			3263.43
'	ay cobronic of nonnecod macpondonic expo	Tidital Co			3203.43
(	(b) SUBTOTAL of Unitemized Independent Ex	penditures		·· •	7 1 7 1 7
(	(c) TOTAL Independent Expenditures				17117117
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
	HICKEY, BRIAN, E, Mr.,	[Electron	ically Filed] Date	M M /	26 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Signature		_ Date	- 10	2010

#### 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

**PAGE** OF (Schedule E) FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ EARN INTERNATIONAL UNION OF OPERATING ENGINEERS C00624817 Check if | X | 24-hour report 48-hour report X New report Amends report filed on Full Name of Payee Date of Public Distribution/Dissemination LANDMARK STRATEGIES 25 2016 10 Mailing Address 8741 Center Rd Amount State Zip Code City 4546.29 VA 22152 Transaction ID: SE.4568 Springfield Date of Disbursement or Obligation Purpose of Expenditure Category/ **ROBO Calls** 004 10 25 2016 Type Name of Federal Candidate Office Sought: X Support House District: CLINTON, HILLARY, RODHAM, , Oppose President Senate State: Disbursement For: Primary **✗** General Calendar Year-To-Date 149468.12 2016 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination LANDMARK STRATEGIES 10 25 2016 Mailing Address 8741 Center Rd Amount City State Zip Code 113.00 VA Transaction ID: SE.4569 Springfield 22152 Date of Disbursement or Obligation Purpose of Expenditure Category/ 004 **ROBO Calls** 2016 10 25 Type Name of Federal Candidate **✗** Support Office Sought: House District: HASSAN, MARGARET WOOD, , , NH Oppose President Senate State: Primary **X** General Calendar Year-To-Date Disbursement For: 2016 1372.62 Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 4659.29 (b) SUBTOTAL of Unitemized Independent Expenditures ..... (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. HICKEY, BRIAN, E, Mr., [Electronically Filed] 10 26 2016 Date Signature

### 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)		PAGE 4 OF 8 FOR SE OF FORM 24/48
AME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATIN	IG ENGINEERS	
		C C00624817
check if X 24-hour report 48-hour report New rep	ort Amends repo	rt filed on
Full Name of Payee LANDMARK STRATEGIES		Date of Public Distribution/Dissemination
Mailing Address 8741 Center Rd		10 25 2016
5 0741 Genter Nu		Amount
City State	Zip Code	225.32
Springfield VA	22152	Transaction ID : SE.4570 Date of Disbursement or Obligation
Purpose of Expenditure ROBO Calls	Category/ Type 004	10 / 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	<b>✗</b> Support	Office Sought: X House District: 07
DRISKELL, GRETCHEN, , ,	Oppose	President Senate State: MI
Calendar Year-To-Date Per Election for Office Sought	4842.29	Disbursement For: Primary   2016
Full Name of Payee		Date of Public Distribution/Dissemination
LANDMARK STRATEGIES		10 25 2016
Mailing Address 8741 Center Rd		Amount
City State	Zip Code	359.21
Springfield VA	22152	Transaction ID : SE.4571  Date of Disbursement or Obligation
Purpose of Expenditure ROBO Calls	Category/ Type 004	10 25 / 2016
Name of Federal Candidate	<b>✗</b> Support	Office Sought: House District:
MASTO, CATHERINE CORTEZ, , ,	Oppose	President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought	16241.16	Disbursement For:  Primary  General 2016  General Other (specify) ▶
•		
(a) SUBTOTAL of Itemized Independent Expenditures		. ▶ 584.53
(b) SUBTOTAL of Unitemized Independent Expenditures		•
(c) TOTAL Independent Expenditures		•
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
HICKEY, BRIAN, E, Mr.,  [Electron	ically Filed] Date	10 / 26 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

Signature

#### 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

**PAGE** OF 5 (Schedule E) FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ EARN INTERNATIONAL UNION OF OPERATING ENGINEERS C00624817 Check if | X | 24-hour report 48-hour report X New report Amends report filed on Full Name of Payee Date of Public Distribution/Dissemination THOMPSON RYER 2016 10 25 Mailing Address 2120 L Street, NW, #305. Amount State Zip Code City 740.70 DC 20037 Transaction ID : SE.4572 Washington Date of Disbursement or Obligation Purpose of Expenditure Category/ **Door Hangers** 004 10 25 2016 Type Name of Federal Candidate Office Sought: × Support House District: CLINTON, HILLARY, RODHAM, , Oppose President Senate State: Disbursement For: Primary **✗** General Calendar Year-To-Date 2016 150208.82 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination THOMPSON RYER 10 25 2016 Mailing Address 2120 L Street, NW, #305. Amount City State Zip Code 106.45 DC Transaction ID: SE.4573 20037 Washington Date of Disbursement or Obligation Purpose of Expenditure Category/ 004 **Door Hangers** 2016 10 25 Type Name of Federal Candidate **✗** Support Office Sought: House District: HASSAN, MARGARET WOOD, , , NH Oppose President Senate State: Primary **X** General Calendar Year-To-Date Disbursement For: 2016 1479.07 Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 847.15 (b) SUBTOTAL of Unitemized Independent Expenditures ..... (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. HICKEY, BRIAN, E, Mr., [Electronically Filed] 10 26 2016 Date

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FOR SE	OF	FORM	24/48

·						FOR SE OF	FORM 24/48
NAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS				_ <del></del>	FEC	IDENTIFICATION	ON NUMBER ▼
					C	C00624817	
Check if 24-hour report 48-hour report	X New repo	ort Ame	nds repo	rt filed on	M = M	/ D = D /	Y Y Y Y Y
Full Name of Payee THOMPSON RYER				Da		olic Distribution/	
					10	25	2016
Mailing Address 2120 L Street, NW, #305.				Ar	mount		
City	State	Zip Code		$-$   $\Gamma$			106.45
Washington	DC	20037				n ID : SE.4574 bursement or C	Obligation
Purpose of Expenditure Door Hangers		Category/ Type	004		M M	25	2016
Name of Federal Candidate		X Su	upport	Office So	ught:	<b>X</b> House	District:07
DRISKELL, GRETCHEN, , ,			opose	Pre	esident	Senate	State: MI
Calendar Year-To-Date Per Election for Office Sought		4948.74		Disburser 2016	ment For:	,	<b>x</b> General
Full Name of Payee						specify) ► blic Distribution/	Discomination
THOMPSON RYER				Di	ate of Pub	/ D D /	/Dissemination 2016
Mailing Address 2120 L Street, NW, #305.				Ar	mount	25	2010
City	State	Zip Code		- $ $ $ $ $ $ $ $			127.40
Washington	DC	20037		<b>I</b>		ID: SE.4575 sbursement or C	Obligation
Purpose of Expenditure Door Hangers		Category/ Type	004		10	25	2016
Name of Federal Candidate		X Su	upport	Office Sc	ought:	House	District:
MASTO, CATHERINE CORTEZ, , ,		O <sub>I</sub>	ppose		esident	<b>X</b> Senate	State: NV
Calendar Year-To-Date Per Election for Office Sought		16368.56		Disburser 2016	ment For:	Primary	<b>x</b> General
(a) SUBTOTAL of Itemized Independent Expenditu	ures			<b>•</b>			233.85
(b) SUBTOTAL of Unitemized Independent Expen	ditures			• [			
(c) TOTAL Independent Expenditures				• [		7	
Under penalty of perjury I certify that the indepen with, or at the request or suggestion of, any candi party committee) any political party committee or it	idate or authorized						
HICKEY, BRIAN, E, Mr.,	[Electron	ically Filed]	Date	10	/ 26		6
Signature							

PAGE	7	OF	8	
FOR SE	OF	FORM 24	1/48	

	FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full)  EARN INTERNATIONAL UNION OF OPERATING ENGINEERS  FEC IDENTIFICATION NUMBER ▼				
C C00624817				
Check if X 24-hour report 48-hour report New report Amends report filed	on Mam / Dad / Yayayay			
Full Name of Payee THOMPSON RYER	Date of Public Distribution/Dissemination			
Mailing Address 2120 L Street, NW, #305.	10 25 / 2016			
2120 L Street, NW, #305.	Amount			
City State Zip Code	31829.21			
Washington DC 20037	Transaction ID : SE.4587 Date of Disbursement or Obligation			
Purpose of Expenditure Postage/Production Mailings  Category/ Type  004	10 25 2016			
Name of Federal Candidate Support Office	e Sought: House District:			
CLINTON, HILLARY, RODHAM, , Oppose	President Senate State:			
Calendar Year-To-Date Per Election for Office Sought  Disbut 2016	ursement For: Primary General			
Tel Election for Office Sought	Other (specify)			
Full Name of Payee THOMPSON RYER	Date of Public Distribution/Dissemination			
Mailing Address	10 25 2016			
walling Address 2120 L Street, NW, #305.	Amount			
City State Zip Code	455.48			
Washington DC 20037	Transaction ID : SE.4588 Date of Disbursement or Obligation			
Purpose of Expenditure Postage/Production Mailings  Category/ Type  004	10 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Name of Federal Candidate Support Office	e Sought: House District:			
HASSAN, MARGARET WOOD, , ,	President Senate State: NH			
Calendar Year-To-Date Per Election for Office Sought  Disbrace 1934.55	ursement For: Primary General			
Tel Liection for Office Sought	Other (specify) -			
(a) SUBTOTAL of Itemized Independent Expenditures	32284.69			
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
HICKEY, BRIAN, E, Mr.,  [Electronically Filed] Date 1	0 26 2016			
Signature	2010			

#### 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	101123	PAGE 8 OF 8 FOR SE OF FORM 24/48		
IAME OF COMMITTEE (In Full) EARN INTERNATIONAL UNION OF OPERATING ENGINEERS  C C00624817				
Check if 24-hour report 48-hour report New report	ort Amends report file	d on Mam / Dad / Yayayay		
Full Name of Payee THOMPSON RYER		Date of Public Distribution/Dissemination  10 25 2016		
Mailing Address 2120 L Street, NW, #305.		Amount		
City State Washington DC	Zip Code 20037	728.79 Transaction ID : SE.4590		
Purpose of Expenditure Postage/Production Mailings	Category/ Type 004	Date of Disbursement or Obligation  10 25 2016		
Name of Federal Candidate  MASTO, CATHERINE CORTEZ, , ,	X Support Office Oppose	te Sought: House District:  President		
Calendar Year-To-Date Per Election for Office Sought	17097.35 Disb 2016	oursement For: Primary General  Other (specify)		
Full Name of Payee THOMPSON RYER		Date of Public Distribution/Dissemination  10 25 2016		
Mailing Address 2120 L Street, NW, #305.		Amount		
City State Washington DC	Zip Code 20037	457.39  Transaction ID : SE.4591  Date of Disbursement or Obligation		
Purpose of Expenditure Postage/Production Mailings	Category/ Type 004	10 25 / 2016		
Name of Federal Candidate  DRISKELL, GRETCHEN, , ,	Support Office Oppose	ce Sought:   House District: 07  President Senate State: MI		
Calendar Year-To-Date Per Election for Office Sought	5406.13 Disk 201	oursement For: Primary ★ General  Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures	<b></b>	1186.18		
(b) SUBTOTAL of Unitemized Independent Expenditures	·····			
(c) TOTAL Independent Expenditures	·	54351.45		
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.				
HICKEY, BRIAN, E, Mr.,  [Electronic Signature]	11 711 17	10 26 2016		